



PTO/SB/21 (09-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

10/792,176

Filing Date

March 2, 2004

First Named Inventor

Chait, Brian T.

Art Unit

1614

Examiner Name

Delacroix-Muirheid, Cybille

Attorney Docket Number

016866-000211US

ENCLOSURES (Check all that apply)

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a
Provisional ApplicationPower of Attorney, Revocation
Change of Correspondence Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s) _____



Landscape Table on CD



After Allowance Communication to TC

Appeal Communication to Board
of Appeals and InterferencesAppeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify
below):

Return Postcard

Certified Copy of Priority
Document(s)Reply to Missing Parts/ Incomplete
ApplicationReply to Missing Parts
under 37 CFR 1.52 or 1.53

Remarks

The Commissioner is authorized to charge any additional fees to Deposit
Account 20-1430.**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Townsend and Townsend and Crew LLP

Signature

Printed name

Kenneth A. Weber

Date

October 28, 2005

Reg. No.

31,677

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

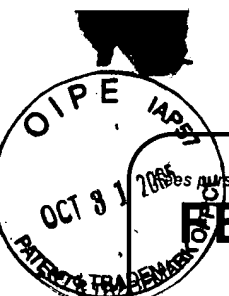
Signature

Typed or printed name

Jo Ann Honcik Dallara

Date

October 28, 2005



Effective on 12/08/2004.

As required by the Consolidated Appropriations Act, 2005 (H.R. 4818).

FREE TRANSMITTAL
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 65)**Complete if Known**

Application Number	10/792,176
Filing Date	March 2, 2004
First Named Inventor	Chait, Brian T.
Examiner Name	Delacroix-Muirheid, Cybille
Art Unit	1614
Attorney Docket No.	016866-000211US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

_____ -20 or HP = _____ x _____ = _____ **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ -3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Terminal Disclaimer Fee (small entity)**Fees Paid (\$)**
65**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 31,677	Telephone 415-576-0200
Name (Print/Type)	Kenneth A. Weber		Date October 28, 2005



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On October 28, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: *Jo Ann Honcik Dallara*
Jo Ann Honcik Dallara

PATENT
Docket No.: 016866-000211US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

CHAIT et al.

Application No.: 10/792,176

Filed: March 2, 2004

For: METHOD FOR DETECTING
POST-TRANSLATION
MODIFICATIONS OF PEPTIDES

Customer No. 53671

Confirmation No.: 3757

Examiner: Delacroix-Muirheid, Cybille

Art Unit: 1614

COMMUNICATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following communication is responsive to the Office Action mailed on August 25, 2005.

Claims 64-74 are pending. All the pending claims are rejected for obviousness-type double patenting in view of U.S. Pat. No. 6,271,037. Applicants respond by filing a Terminal Disclaimer with fee authorization which accompanies this communication.

CHAIT et al.
Application No.: 10/792,176

PATENT



CONCLUSION

Applicants submit that the outstanding rejections have been fully addressed and that the claims are in condition for allowance. Should the Examiner believe that prosecution could be expedited by way of a telephone interview, she is invited to call the undersigned attorney at the number provided below.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Kenneth A. Weber".

Kenneth A. Weber
Reg. No. 31,677

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